

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH
DRINKING WATER SECTION

PUBLIC WATER SYSTEM GENERAL APPLICATION FOR APPROVAL OR PERMIT

Instructions

Any regulated public water system (PWS) seeking an approval or permit (refer to list in Section C on following page) must submit this general application to the Department in addition to the applicable specific applications noted in Section C in order for the Department to initiate a review. This general application must be completed by either the administrative official or certified operator for the PWS. Sections A through E must be completed. Incomplete applications will be rejected. This general application form along with the applicable specific applications noted in Section C may be obtained from the DPH Drinking Water Section's web page by going to the DPH webpage at <http://www.ct.gov/dph> and clicking on the Drinking Water Section Link. Each phase of a multi-phase project requires a completed general application form.

Section A. Public Water System and Applicant Information

PWS Name: LWPCA Gales Ferry

For new PWS indicate proposed name of PWS. A PWSID# will be assigned by the Department for a new PWS

Project Name: Inactivate the Booster Chlorination Treatment Plant

Project Address: Gales Ferry Chem Building, Route 12 at the Groton/Gales Ferry border

PWSID Number: CT0727051

PWS Type (select one): Community NTNC

TNC

Town: Gales Ferry

DPH Project Number (if known): Not

Applicable

Print Name of PWS Administrative Official or Certified Operator: Honorable Fred Allyn III

Title: Mayor

Address: 741 Colonel Ledyard Highway

Ledyard, CT 06339

Phone Number: (860) 464-3221

Fax Number: (860) 464-8455

E-mail Address: mayor@ledyardct.org


Signature of PWS Administrative Official or Certified Operator:

5/30/2023
DATE

Section B. Basis for Requesting Approval or Permit (select all that apply)

- Formal Enforcement Action (Administrative Order, Consent Order, Notice of Violation (Civil Penalty))
- Violation Identified in Sanitary Survey Report
- Water Quality Exceedance (select all that apply): MCL, Pb/Cu AL, Secondary MCL, Other: _____
- Project Identified in Approved Water Supply Plan
- Federal or State Grants or Loans DWSRF STEAP Funds STAG Funds
- Certificate of Public Convenience and Necessity (CPCN)
- Proactive (system improvements or enhancements)
- Other: Sodium hypochlorite booster Treatment System has not been used for many years; we wish to inactivate this Treatment System.

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Section C. Type of Approval or Permit Requested (select all that apply)

Source	Treatment	Distribution
<input type="checkbox"/> Well Site (must submit Application for a Public Water System Well Site Approval) <input type="checkbox"/> Well Construction and Yield (refer to General Terms for Well Site Development guidance document) <input type="checkbox"/> Well Water Quality (refer to Water Quality Monitoring of Proposed/New Sources of Supply guidance document) <input type="checkbox"/> Groundwater Under the Direct Influence of Surface Water (GWUDI) Demonstration Study (refer to Determination of Groundwater Under The Direct Influence of Surface Water criteria) <input type="checkbox"/> Source Improvements (including well pit improvements) <input type="checkbox"/> Source Abandonment Permit (must submit Source Abandonment Permit Application) <input type="checkbox"/> Water Company Owned Lands Permit-Change in Use (must submit Water Company Land Permit Application & Application Supplement) <input type="checkbox"/> Water Company Land Sale or Transfer of a Water Company (must submit Water Company Land Permit Application & Application Supplement) <input type="checkbox"/> Recreation Use Permit of Water Company Owned Lands (must submit Permit Application for Recreational Activity on Reservoir) <input type="checkbox"/> Storm Water Discharge Permit (must submit detailed site plan of proposed storm water discharge, refer to RCSA Section 19-13-B32i) <input type="checkbox"/> Raw Water Pumping Station <input type="checkbox"/> Raw Water Transmission Main (must submit Water Main Application) <input type="checkbox"/> Sale of Excess Water Permit (must submit Sale of Excess Water Permit Application) <input checked="" type="checkbox"/> Other: <u>Groton Utilities water</u>	<input type="checkbox"/> Activated Carbon Adsorption <input type="checkbox"/> Aeration <input type="checkbox"/> Arsenic Removal <input type="checkbox"/> Chemical Changes <input type="checkbox"/> Chemical Corrosion Control <input type="checkbox"/> Contact Time (CT) Evaluation <input checked="" type="checkbox"/> Disinfection <input checked="" type="checkbox"/> Chemical <input type="checkbox"/> Ultraviolet Light (UV) <input checked="" type="checkbox"/> Other <u>Inactivate Booster chlorination treatment system</u> <input type="checkbox"/> Ion Exchange <input type="checkbox"/> Iron/Manganese, Iron Bacteria Control <input type="checkbox"/> Aeration <input type="checkbox"/> Greensand filter <input type="checkbox"/> Ion Exchange <input type="checkbox"/> Oxidation <input type="checkbox"/> Sequestering <input type="checkbox"/> Other _____ <input type="checkbox"/> Membrane Filtration / Reverse Osmosis <input type="checkbox"/> pH Adjustment <input type="checkbox"/> Chemical <input type="checkbox"/> Calcite Filter <input type="checkbox"/> Other _____ <input type="checkbox"/> Pilot Study <input type="checkbox"/> Radiological Removal (Rad 226, Rad 228, Uranium, Gross Alpha) <input type="checkbox"/> Surface Water Treatment Plant-coagulation, flocculation, sedimentation/clarification, filtration <input type="checkbox"/> Treatment Residuals/Backwash Wastewater Management <input type="checkbox"/> Other: _____	<input type="checkbox"/> Consolidation of System(s) (includes the addition of new systems) <input type="checkbox"/> Interconnection Between Existing Systems <input type="checkbox"/> Pressure Reduction Valves (PRV) <input type="checkbox"/> Pumping Station <input type="checkbox"/> Storage Tank <input type="checkbox"/> Water Main (only if associated with pumping stations, storage facilities, treatment facilities, sources of supply or funded by a State or Federal grant/loan - must submit water main application) <input type="checkbox"/> Other: _____ <hr/> <div style="text-align: center;">General</div> <input type="checkbox"/> CPCN – Phase 1A <input type="checkbox"/> CPCN – Phase 1B <input type="checkbox"/> CPCN – Phase II <input type="checkbox"/> Water Supply Plan <input type="checkbox"/> DWSRF Eligibility Application <input type="checkbox"/> DWSRF Engineering Agreement (Pre-Award) <input type="checkbox"/> DWSRF Full Loan Application <input type="checkbox"/> DWSRF Pre-Bid Construction Contract <input type="checkbox"/> DWSRF Post-Bid Documents and Information <input type="checkbox"/> Sampling Plan (refer to DWS web page for instructions, form, and guidance) <input type="checkbox"/> Water System Improvements Study (must submit detailed engineering report) <input type="checkbox"/> Other: _____ <p>NOTE: Detailed plans and supporting documents must be submitted at the time of application for all projects</p>

